PÅTENT APPL	ICATION FE	ETERMINA per 1, 2000	TION REC	ORD	09/	100		Imper
CLA	IMS AS FILED - (Column	•	olumn 2)	SMALI TYPE	ENTITY	ــــــــــــــــــــــــــــــــــــــ	OTHE	R THAN
TOTAL CLAIMS			(Column 2)		<u> </u>	_OR		ENTITY
FOR	NUMBER	FILED NUM	NUMBER EXTRA		FEE	-	RATE	FEE
TOTAL CHARGEABLE C	AIMS V min	ius 20= *	•			OR	BASIC FE	8/06
INDEPENDENT CLAIMS		nus 3 =	•		= : 	OR	X\$18=	
MULTIPLE DEPENDENT						OR	X80=	
* If the difference in colu	mn d in land the			+135=		OR	+270= ,	D.
* If the difference in colu	TOTAL		OR	TOTAL	160			
CLAIMS (Colu	OTHER THAN							
CLA	IMS CONTRACTOR	(Column 2) HIGHEST	(Column 3)	SMALI	ENTITY	OR	SMALL	ENTITY
Total REMA AFT AMEND Total	ER MENT	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Independent •	Minus	· 20	=	X\$ 9=	1	OR	X\$18=	
FIRST PRESENTATION	Minus OF MULTIPLE DEPO	MDEATT OLAM	=	X40=		OR	X80=	
	o. Moeth EE DEFE	INDENT CLAIM		+135=		OR	+270=	/
(0.1				TOTAL ADDIT. FEE		OR AI	TOTAL DDIT. FEE	
(Colum CLAIN	AS THE STREET	(Column 2) HIGHEST	(Column 3)			· 	L	
AFTE AMENDA	R	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total		•	=	X\$ 9=		OR 3	X\$18=	<u> </u>
Independent •	1 1	**	=	X40=	· ·	`` -	X80=	
FIRST PRESENTATION (OF MULTIPLE DEPEN	IDENT CLAIM				OR _	X00 ≡	
				+135=		R 📑	270=	
	era anne era a territoria de la composición del composición de la composición del composición de la composición del composición de la composición del composición de la compos	MATRINEST		TOTAL ADDIT. FEE	CONTRACT C	R. AD	TOTAL DIT. FEE	Assess
A CLAIMS		Column 2) (HIGHEST	Column 3)		The Free		Olunted	ANNE I
REMAINII AFTER	P		PRESENT EXTRA	RATE~	ADDI- TIONAL	9		ADDI-
Total	NTO	PAID FOR		Par trada	FEE			IONAL FEE
Independents :	control of the second section of the second	=		X\$ 9=	o de la companya de l	r X	\$18=	
FIRST PRESENTATION OF	Minus MULTIPLE DEPEND	ENT CLAIM		X40=			80=3-	
			A THE PERSON NAMED IN	1125			ENGLISH ME	1888
the entry in column, t is less the the Highest Number Previously the Highest Number Previous	in the entry in column 2.	write "0" in colum	na Pille L	+135=	SOLC OF		70=	
the Highest Number Providered	Ada Col IIA THIS SPA	CE is less than 20), enter "20." 🗀 🛦	DOM: CO. I	OF	ADDI	TOTAL TOTAL	PLATE
he, Highest Number Previously	College or inde	encent) is the hig	nest number four	nd in the appro	priate box in o	olumn		
00		and the second s	Palor	n and Tradement				

WWATELLEAST SHIP THE DETERMINATION

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

 λ_i^*

Effective October 1, 2001

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE OF			OTHER THAN R SMALL ENTITY			
TOTAL CLAIMS							RATE	FEE		RATE	FEE		
FOR A CARLON AND A		NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS			i - ininus 20= *		*	* *		X\$ 9=		OR	X\$18=		
IND	EPENDENT CL	AIMS		→ "mi	nus 3 =	*			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT									+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II											OTHER	THAN	
(Column 1)				(Colu	mn 2)	(Column 3)	_	SMALL	NTITY	OR	SMALL	ENTITY	
AMENDMENT A		REN A	LAIMS MAINING IFTER NDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT . EXTRA		RATE	ADDI- TIONAL FEE		BATE	ADDI- TIONAL FEE
NDM	Total	*	16	Minus	** 2	20	=		X\$ 9=-		OR	X\$18=	
ME	Independent	*	2	Minus		3	=		X 42=		OB⁄	X84=	
	FIRST PRESE	NTATI	ON OF MI	JLTIPLE DEI	PENDEN	T CLAIM		ןנ	+140=		OR	+280=	
									TOTAL			TOTAL	
						-	(0.1		ADDIT. FEE		OR	ADDIT. FEE	
			lumn 1) LAIMS			mn 2) HEST	(Column 3)	' 1 1		ADDI-	1 1	1	ADDI-
ENT B		Α	MAINING AFTER INDMENT	:	PREV	MBER NOUSLY . FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
AMENDMENT	Total	*		Minus	**		=]	X\$ 9=		OR	X\$18=	
MEI	Independent	*		Minus	***		=		X42=		OR	X84=	
Ľ	FIRST PRESE	NTATI	ON OF MI	JLTIPLE DEI	PENDEN	T CLAIM		┛╽	. 1.10			+280=	
									+140=		OR	TOTAL	
	•								ADDIT. FEE		JOR	ADDIT. FEE	
			lumn 1)			ımn 2)	(Column 3	<u>)</u>					
ENTC		RE	LAIMS MAINING AFTER NDMENT		NUM PREV	HEST MBER IOUSLY Q FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	,	RATE	ADDI- TIONAL FEE /
AMENDMENT	Total	*	72	Minus	** 8	D			X\$ 9=	7	OR	X\$18=	
	Independent	*	7	Minus	***	3	=		X42=		OR	X84=	/
L	FIRST PRESE	NTAT	ON OF M	ULTIPLE DE	PENDEN	IT CLAIM					1		1/
to the second se								+140=		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													